

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. C A D 0 0 8 3 0 2 9 0 3	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address Oil & Solvent Process Company 1704 West First Street., Azusa, CA 91702			A.State Manifest Document Number 84126473			
4. Generator's Phone (818) 334-5117			B.State Generator's ID C A D 0 0 8 3 0 2 9 0 3			
5. Transporter 1 Company Name Oil & Solvent Process Company			C.State Transporter's ID 53153			
6. US EPA ID Number C A D 0 0 8 3 0 2 9 0 3			D.Transporter's Phone 818 334-5117			
7. Transporter 2 Company Name			E.State Transporter's ID			
8. US EPA ID Number			F.Transporter's Phone			
9. Designated Facility Name and Site Address Omega Chemical Company 12504 E. Whittier Blvd Whittier, Ca 90602			G.State Facility's ID C A D 0 4 2 2 4 5 0 0 1			
10. US EPA ID Number C A D 0 4 2 2 4 5 0 0 1			H.Facility's Phone 213 968-0991			
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)				12. Containers No. Type	13. Total Quantity	14. Unit Wt/Vol
a. Hazardous Waste Liquid N.O.S. ORM-E MAX NA9189				001 TT	3670	G
b.						
c.						
d.						
J. Additional Descriptions for Materials Listed Above Trichlorotrifluoroethane 96% - 92% Methanol / Ethanol 3% - 1% Oil / Water / Dirt 4% - 2%				K.Handling Codes for Wastes Listed Above P01		
15. Special Handling Instructions and Additional Information Gloves & Goggles						
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.						
Printed/Typed Name Betty Peckham				Signature Betty Peckham		Date Month Day Year 2/15/85
17. Transporter 1 Acknowledgement of Receipt of Materials				Signature Raymond Rivera		Date Month Day Year 2/15/85
Printed/Typed Name RAYMOND RIVERA				Signature		Date
18. Transporter 2 Acknowledgement of Receipt of Materials				Signature		Date Month Day Year
Printed/Typed Name				Signature		Date
19. Discrepancy Indication Space						
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.						
Printed/Typed Name TIM BALTIERA				Signature Tim Baltierra		Date Month Day Year 02/15/85

White: TSDF SENDS THIS COPY TO DOHS WITHIN 30 DAYS
TO: P.O. Box 3000, Sacramento, CA 95812